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Bib Data Sheet

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| SERIAL NUMBER<br>10/702,223 | FILING OR 371(c)<br>DATE<br>11/05/2003<br>RULE | CLASS<br>224 | GROUP ART UNIT<br>3781 | ATTORNEY DOCKET NO.<br>005127.00249 |
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## APPLICANTS

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*OK TM*

## \*\* CONTINUING DATA \*\*\*\*\*

*Noe TM*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*Noe TM*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

02/04/2004

|                                 |  |                     |                      |                    |                         |
|---------------------------------|--|---------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR COUNTRY OR | SHEETS DRAWING<br>10 | TOTAL CLAIMS<br>35 | INDEPENDENT CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                     |                      |                    |                         |
| Verified and Acknowledged       | Examiner's Signature _____ Initials _____  |                     |                      |                    |                         |

## ADDRESS

22910

## TITLE

Compression system for backpack

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1170 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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